

Best Available Copy

CLAIMS ONLY							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.
1	/						51		
2	/	/					52		
3	/						53		
4	/						54		
5	<i>Skipped</i>						55		
6							56		
7	/						57		
8	/						58		
9	/						59		
10	/						60		
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41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	/						TOTAL IND.		
TOTAL DEP.	/						TOTAL DEP.		
TOTAL CLAIMS	19						TOTAL CLAIMS		

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS